



GAU 3736

Express Mail Mailing Label No.: EM443444824US

TRANSMITTAL
FORM

Application Serial Number	08/922,263
Filing Date	September 2, 1997
First Named Inventor	Crowley
Group Art Unit	3736
Examiner Name	D. Shay
Attorney Docket No.	BSC-011

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TECHNOLOGY CENTER 3736

ENCLOSURES (check all that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> Fee Transmittal Form
<input type="checkbox"/> Check Attached
<input type="checkbox"/> Copy of Fee Transmittal Form

<input type="checkbox"/> Amendment/Response
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]

<input type="checkbox"/> Extension of Time Request

<input type="checkbox"/> Information Disclosure Statement

<input type="checkbox"/> Form PTO-1449
<input type="checkbox"/> Copies of IDS Citations

<input type="checkbox"/> Certified Copy of Priority Document(s)

<input type="checkbox"/> Response to Missing Parts/Incomplete Application | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)

<input type="checkbox"/> Formal Drawing(s)

<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition

<input type="checkbox"/> To Convert to a Provisional Application

<input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)

<input type="checkbox"/> Terminal Disclaimer

<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application

<input type="checkbox"/> Small Entity Statement

<input type="checkbox"/> Request for Refund

<input type="checkbox"/> After Allowance Communication to Group | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences

<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)

<input type="checkbox"/> Status Letter

<input checked="" type="checkbox"/> Return Receipt Postcard

<input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8

<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below)
1) Response to Restriction Requirement
2) Associate Power of Attorney
3) Express Mail Mailing Label No.: EM443444838US |
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